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ABSTRACT

This module is designed to provide teachers, teacher trainers, and administrators with an introduction to consultation as a service to support students with disabilities and/or challenging behaviors in their home schools. The module provides a rationale for the use of consultation as a part of school programs, a review of research on its current usage and effectiveness, and some hypotheses about forces affecting the outcomes of consultation. The consultation model implemented is summarized, including steps in the consultation process, and a brief description of the intervention approach employed by project consultations is provided. A typology of consultees that may assist in providing more prescriptive consultation is given, and conclusions are drawn about types of problems effectively addressed by a child-centered consultation model. Includes 26 references. (PB)

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Child-Centered Educational Consultation to Assist Schools
in Serving Students With Disabilities and Severe
Behavior Problems in Integrated Settings:

A Module on Effective Consultation

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Introduction

This module is designed to provide teachers, teacher trainers, and administrators with an introduction to consultation as a service to support students with disabilities and/or challenging behaviors in their home schools.

The module provides a rationale for the use of consultation as a part of school programs, a review of research on its current usage and effectiveness, and some hypotheses about forces affecting the outcomes of consultation.

The consultation model implemented through the Child-Centered Inservice Training and Technical Assistance Network is summarized, including the steps in the consultation process, and a brief description of the intervention approach employed by project consultants. A typology of consultees that may assist in providing consultation that is more prescriptive is given, and conclusions drawn about the types of problems that can be effectively addressed using a child-centered consultation model.

Child-Centered Educational Consultation to Assist Schools
in Serving Students with Disabilities and Severe
Behavior Problems in Integrated Settings

I. What is consultation?

A. Definition: Help offered to another that enables that person to do a better job (Conoley & Conoley, 1981, p. 1).
Note that in the case of school-based consultation, the helper is the consultant, the teacher is the person helped or consultee, and the student is the client.

B. Characteristics of school-based educational consultation
(Conoley & Conoley, 1982):

1. indirect service -- not direct instruction with the student
2. voluntary relationship -- the relationship can be terminated by the consultee at any time
3. non-supervisory relationship -- the consultant does not supervise the teacher receiving consultation, so the consultant cannot be the building or district level administrator
4. collaborative -- the consultant and the consultee work together to address problems; the consultant is not an "expert" who will be providing all the answers
5. focus is work-related problem -- not consultee's mental health or life situation
6. confidentiality of relationship

II. Why consultation as part of programs for students with disabilities and/or behavior problems?

A. Necessary to meet least restrictive environment (LRE) requirements.

1. P.L. 94-142 states that the least restrictive environment is one that allows students with disabilities to be in contact with their nonhandicapped peers to the maximum extent appropriate. Students with disabilities should not be removed from mainstream educational environments unless they can't be successful there even with the addition of supplementary aids and services. Consultation is one of the supplementary services that could be provided to help students with disabilities be successful in

- regular education schools and classrooms.
2. A great deal of literature on consultation was published between 1975 and 1978, just after P.L. 94-142 was passed. Perhaps there was the expectation that this new law would mean that special educators would be consultants to regular education teachers as a primary strategy to meet the requirement that students be served in the least restrictive environment. Similarly, there appears to be a renewed interest in consultative and collaborative teaching models in the mid-1980's, as the regular education initiative received national attention (Harris & Schultz, 1986; Wahlberg & Wang, 1987).

B. Consultation can be effective in achieving a variety of outcomes.

1. Consultation can change consultees' (i.e., teachers') behavior and attitudes:
 - a. Consultation has resulted in increased teacher understanding of students' emotional and behavioral problems (Schmuck, 1968), and in increased teacher understanding of individual differences (Tyler & Fine, 1974).
 - b. Positive changes in the frequency of teachers' compliments to students have been demonstrated (Kosier, 1970), as well as concomitant reductions in negative comments delivered to students (Meyers, Freidman, & Gaughan, 1975).
 - c. Teachers' problem-solving skills have improved following consultation (Schmuck, 1968).
2. Consultation can improve clients' (i.e., students') behavior and achievement:
 - a. One study compared the effectiveness of indirect services (i.e., resource teacher consultation) with the effectiveness of direct services (i.e., direct instruction from resource teachers) for students labeled emotionally disturbed. Twenty-seven percent more of the pupils who had received indirect services made a full and successful return to full and unaided classroom participation (Wixson, 1980).
 - b. In another study, trained support teachers (consultants) were made available to regular education teachers in five school districts in Tennessee (Cantrell & Cantrell, 1976). There were

- no referral criteria, and students did not have to be labeled; the support teachers were available to help the teachers address the problems of any child or children about whom the teacher was concerned. At control schools, this support was not available. Outcome measures were student achievement and the number of referrals for psychological services the following school year.

- (1) achievement -- gains in achievement tests were higher in experimental schools for students at all IQ levels; there was also less variability of achievement scores for students in experimental schools (that is, in control schools, the gap between higher achieving and lower achieving students increased);
- (2) referrals -- referrals by teachers for psychological services the following year were lower in the experimental schools.

c. Behavioral consultation has been effective in improving students' behavior in the classroom (Ajchenbaum & Reynolds, 1981; Kosier, 1970).

c. Consultation fulfills the criterion of the least dangerous assumption, which states that in absence of conclusive data, educational decisions should be based on assumptions which, even if they're incorrect, will have the least dangerous affect on student's ultimate functioning (Donnellan, 1984). So, if we're not sure that categorical and/or restrictive placements for students with learning and behavior problems are more beneficial than mainstream placements with supplemental aids and services, these students should remain in regular classrooms and schools. This is especially true if we know that there are positive benefits that accrue from disabled and nondisabled children's learning and playing together.

At present, there are no data that show conclusively that special education as a whole is more effective than regular education in meeting the needs of exceptional learners (Lipsky & Gartner, 1987). It seems that effective special education teachers do the same things effective regular education teachers do: they devote more class time to task-related academic activities, offer greater structure and more interactions directly related to lesson content, and leave students with less unoccupied time (Larivee, 1985).

Unless being identified results in receiving effective services, there is no value to being identified. In fact,

negative outcomes occur if being identified means being deprived of typical educational and social opportunities (Algozzine & Sherry, 1981). Consultation is a way to provide needed services without depriving children who have disabilities of those typical opportunities.

III. Is consultation being used for students with learning and behavior problems?

- A. A nationwide survey of placement options being used for students labeled seriously emotionally disturbed (Grosenick, 1981) revealed that :
 1. the majority of children with severe behavior disorders were in self-contained and segregated classes and programs;
 2. within-district self-contained, special schools, and out-of-district placements were each used more often than consultant teacher services that enabled the student to remain with his or her nonhandicapped peers.
- B. An analysis of regular education teachers' preferred interventions for students exhibiting behavior problems (Sevcik & Ysseldyke, 1986) found that 66% used teacher-directed interventions, and only 10% employed consultative actions. The authors concluded that when teachers do make a referral or indicate the need for outside help, they expect special education placement outside their classroom to be the result.
- C. Several other studies have examined the amount of time special education teachers spend fulfilling a variety of possible roles, including consulting with regular education teachers and providing direct instruction to students.
 1. A study of the role of the resource teacher found that the majority of those surveyed (80%) saw consultation actually comprising 5% or less of their duties. (They spent an average of 56% of their time in direct instruction.) The majority saw this as about one-half the ideal (Evans, 1980).
 2. A survey of teachers of adolescents diagnosed as emotionally disturbed in 50 states (Schmid et al., 1984) found that:
 - a. remediation and development of basic academic skills were ranked as the most important roles;

- b. working with general education faculty was not ranked as important by most teachers surveyed.

IV. Why is so little consultation being done? We can suggest several plausible reasons:

- A. Special education teachers seldom if ever receive training in consultation at the preservice level; training in consultation is conducted mainly in school psychology programs.
- B. Teachers are expected to be independent: One doesn't typically ask a colleague for help. There appears to be a bias that if the teacher can't handle the child, the child must not "belong" in the class.
- C. Help from other professionals is not always available to the classroom teacher. School psychologists, for example, spend the majority of their time doing assessments and diagnoses. Resource teachers, on the other hand, spend the majority of their time providing direct service rather than consulting with other teachers. Thus, teachers who seek services for students with exceptional learning and behavioral needs are pushed in the direction of finding those services outside the classroom.
- D. Lack of administrative support for consultation. Resource teachers or other designated personnel need to be provided with time for consulting and with an organizational structure that lends itself favorably to the logistics of the consultation process. Consultation is not now an integral component of most special education service delivery models, especially for students with severe disabilities and/or challenging behaviors.
- E. P.L. 94-142 may itself be an obstacle to consultation, as special education funding is based on identifying and labeling a specific percentage of the school age population and then restricts the provision of special education services to only those children meeting certain eligibility criteria.

V. A Collaborative Consultation Model for Supporting Students With Disabilities and Challenging Behaviors in Local Schools: The Child-Centered Inservice Training and Technical Assistance Network?

- A. The project's purpose is to assist school districts anywhere in New York State in serving students with the most severe disabilities and challenging behaviors in regular education schools and classrooms. The project provides several kinds of inservice training experiences and consultants to work

on-site with the professional staff serving 15 target students each year. The goals of project consultation are:

1. To remediate the behavior problems and increase alternative adaptive skills of target students.
2. To increase teachers' skills in addressing the needs of those students who have severe disabilities and challenging behaviors in regular education schools and classrooms.

B. Target population.

1. Students with the most severe disabilities, including students who are deaf and blind, multiply physically and mentally disabled, autistic, seriously emotionally disturbed, and/or who have serious behavior problems.
2. Students who are placed in regular education schools in their home school districts. The most restrictive placement for which the project can provide support is a self-contained class within a regular school. Services are not provided in segregated sites.
3. Priority is given to:
 - a. students recently returning to an integrated setting from a segregated setting;
 - b. students at risk for removal to a more restrictive setting; and
 - c. students who, because of their challenging needs, are not participating in some of the integrated school and community training experiences available to their classmates.

C. Selection of participating professional staff.

1. Participation must be completely voluntary.
2. The teacher must be willing to collaborate on the development, implementation, and evaluation of an intervention plan.
3. The teacher must be committed to the use of non-aversive, normalized interventions for behavior problems.

D. Characteristics of Consultation Provided.

1. on-site
2. child-centered -- initially directed toward addressing the learning and behavioral problems of the target student
3. frequent -- weekly or bi-weekly in most cases
4. ongoing -- throughout the school year if necessary
5. collaborative -- "facilitative," not "expert"
6. problem-solving focus -- individualized interventions, not cookbook solutions
7. preventive orientation -- emphasizing process skills for the teacher that will generalize and transfer
8. primarily indirect assistance -- direct work by the consultant with the students is not the focus

(For a more complete description of steps in the consultation model, see Janney and Meyer, 1989, A Protocol for Child-Centered Educational Consultation.)

VI. Outcomes for years one and two (1986-87 and 1987-88 school years).

A. During the 1986-87 school year, the project provided services for 15 target students in six school districts. As of January, 1988:

1. Nine remained in integrated placements;
2. Two had moved to foster homes in other districts where no integrated options were made available to them. Both students had made good progress at school in their previous integrated placements;
3. Two had moved to residential placements, not because of lack of progress in school, but due to difficulties at home;
4. One family moved to another district where no integrated option was made available. The student had made excellent progress in the integrated placement;
5. One student, who lives in an institution, has aged out of the school program where he was doing well and is on a waiting list for vocational programming: In the

interim, day treatment services at the institution are minimal.

- B. During the 1987-88 school year, the project served 9 individual target students and also provided consultation and technical assistance for three target classes -- new programs established in two school districts for students who had previously been placed out-of-district. Outcomes for these students as of June 1988:

1. Seven of the original nine target students and all of the students in the target classes remain in integrated placements (though one target student was moved from an integrated class placement to a self-contained special education class in another school building in the school district);
2. In one case, the teacher and consultant never reached agreement about an intervention plan; the student was subsequently moved to a more restrictive, "homebound" placement.

C. Project Resources Invested.

1. Consultants spent an average of 40 consultant hours on-site per student or target class;
2. The cost of consultation was approximately \$500 per student or target class.

VII. An analysis of forces affecting the outcomes of project consultation.

It was obvious that the severity of the child's behavior problem was not the most salient variable affecting the outcome of project consultation. Other forces affecting the outcome of these and other consultation interventions include various setting events, consultee characteristics, and consultant characteristics:

A. Setting Events, Including Certain Administrative and Programmatic Factors

1. Knowing who made the referral and why can help predict the outcome of consultation.
 - a. Did the teacher ask for help because he or she was out of ideas? If the teacher initiated the consultant's assistance, the chances for a positive outcome are enhanced.
 - b. Did the parents seek the consultant's help because a Committee on Special Education (CSE) meeting had been called to examine moving the child to a more

restrictive placement? The risks in this type of situation are that the school may already be committed to placement out of the building and the teacher's acceptance of consultation may not be truly voluntary. (For example, the teacher may have been encouraged by the building or district administrators to accept assistance from the consultant as a way to appease the parents, even though the decision to move the child has already in fact been made. The teacher may resent this intrusion into his or her classroom and not be motivated to collaborate with the consultant.) In such situations, project participation and the consultation itself can be used as "evidence" that "everything has been tried with this child, and nothing has worked."

- c. Did a district administrator request a consultant's assistance to appease a frustrated teacher, school staff or building administrator? In such a case, the teacher may have been asking for the student to be removed from his or her classroom, not for help in keeping the child. Another possibility is that the district has made an inappropriate hiring decision or is not meeting its inservice training responsibilities, and project consultation is being used to compensate for basic staff skill deficiencies. In other cases, the district administrator's request may have been prompted by a principal who perceives a student's behavior as disruptive to the school environment; the teacher may feel pressured to accept the consultation even though he or she is not personally interested in doing so.

2. Existing relationships among staff. If staff do not get along or do not work well as a team, a consultant may have difficulty bringing about positive outcomes. In a case such as this, addressing the need for collaborative teaming may be a critical initial objective of consultation.

B. Consultee (Teacher) characteristics and skills.

The consultee's characteristics and skills affect the outcome of consultation.

1. The consultee's attitudes and values, including both philosophical and professional attitudes and values and expectations about the benefits of consulting, have a great deal of bearing on the outcome of consultation. Some of the values and attitudes that seem to promote positive outcomes include: willingness to take

ownership of the problem rather than blaming the child, viewing all children as capable of learning; being willing to collaborate with other professionals; being invested in one's own professional growth.

2. The consultee's technical skills in planning and delivering instruction for students with disabilities and/or behavior problems also help determine the outcome of consultation. Consultee skills in individualizing instruction, designing and facilitating cooperative learning activities, and implementing other "best practices" in the education of exceptional learners greatly enhance the outcome of consultation.

C. Consultant characteristics and skills.

The consultant's characteristics and skills also affect the outcome of consultation. A person with technical expertise in a content area is not necessarily an effective consultant: Knowing how to do something is different from enabling someone else to do it. An effective consultant is a process expert as much as a content expert (Conoley, 1981).

1. The data are equivocal, but it seems that the consultant's interpersonal characteristics determine outcomes; consultees prefer collaborative, approachable people as opposed to "experts" with a less collaborative style (Conoley, 1981).

We concur with Conoley and Conoley (1982) that consultants need the following relationship or interpersonal skills:

a. personal process skills

- (1) supportive, empathic
- (2) flexible (varies behavior according to the situation)
- (3) listening skills: acknowledging, paraphrasing, reflecting, summarizing, clarifying
- (4) self-disclosing
- (5) views self positively
- (6) takes risks
- (7) able to live with stress

b. giving feedback

- (1) communications are helpful, not punitive
- (2) focus on things that can be changed
- (3) give when person seems able to hear
- (4) check listener's understanding of feedback

- (5) focus on the issue, not the person (indirect confrontation)
 - (6) build on consultee's strengths, minimize weaknesses
- c. receiving feedback--model graceful acceptance of feedback
- d. creativity
- 2. Consultants also need the following task skills:
 - a. keeping group on task
 - b. facilitating communication
 - c. modeling and participating in collaborative problem-solving process
 - (1) identify the problem (NOTE: not surprisingly, successful problem identification almost invariably predicts solution of the problem (Conoley & Conoley, 1982))
 - (2) analyze (brainstorm, then discuss pros and cons of each suggestion)
 - (3) implement
 - (4) evaluate
- 3. In addition, Child-Centered Inservice Training Project consultants need the following specific content skills:
 - a. basic principles of teaching and learning such as reinforcement, modeling, shaping;
 - b. criterion and community-referenced curriculum and instruction "best practices" for students with severe disabilities;
 - c. educative approaches to intervention for behavior problems (Evans & Meyer, 1985; Janney & Meyer, 1988):
 - (1) The approach views problem behaviors as skill deficits that tell us what we need to teach the person and/or what it is about the environment that is failing to inhibit the problem.
 - (2) The focus of intervention for behavior

problems is shifted from controlling or managing problem behavior through the use of contingency management procedures to the use of preventive and educational interventions. The intervention plan includes three types of strategies, and, in the case of very serious behaviors, a crisis management plan:

- (a) ecological strategies to prevent problems from occurring until new skills can be learned;
- (b) curricular interventions to teach alternative skills the person can use to accomplish the same thing the problem behavior now accomplishes, and to address underlying skill deficits such as social skill deficits, a lack of self control, or low frustration tolerance for general "at risk" situations in the future;
- (c) consequential procedures that specify how to react when a problem does occur. In general, the idea is to interrupt the behavior and refocus the person;
- (d) crisis management plans are developed if the behavior is sometimes very serious (e.g., self-injury or serious aggression), but a clear distinction is drawn between crisis management as a way to protect the child and other people in an emergency situation, and interventions that actually teach new behaviors.

VIII. Toward Prescriptive Consultation.

In spite of the generally positive results of consultation shown in the research, the research findings are confounded by different consultation models and different outcome measures. Thus, it is difficult to say which consultees with which problems benefit from working with which consultants using which consultation model. The following are some suggestions toward prescriptive consultation that result from an analysis of the outcomes of the Child-Centered Inservice Project.

- A. Individualized Consultation Plans. One way consultants can be more prescriptive is by varying their behavior according to the characteristics of the consultee. Using the two dimensions of attitudes/values and skills/abilities

mentioned in the above discussion of consultee characteristics that affect the outcome of consultation, we can construct a typology of consultees which may help consultants determine an individualized consultation plan (See Figure 1). As with all typologies, this one is based on ideal types; we are not suggesting that all teachers can be neatly categorized into four subgroups.

1. The Type I teacher has both the skills and the values/attitudes described above. He or she could be described as a "Master Teacher." Master teachers need assistance in some of the finer points of developing and implementing educative interventions for behavior problems; they may need assistance in the process of collaborative problem-solving; they may simply need the consultant to boost their confidence and give them feedback.
2. The Type II teacher has the requisite technical skills for teaching children with learning and behavior problems, but does not share the Child-Centered Inservice Project's value base. This teacher could be described as a "technician." Technicians may need some of the same technical fine-tuning the master teachers need, but they also need administrative support in accepting that working with children with challenging behaviors is part of their job. If the administrative support is not available, the problem may be beyond the limits of the consultant's role. There are some who believe that if the teacher wants techniques, you give them what they want in order to "get in the door." Our experience has been that techniques are easily misused if the appropriate values are not in place.
3. The Type III teacher lacks some of the technical skills in designing and delivering instruction, but does have the values/attitudes that facilitate positive outcomes to project consultation. This type of teacher might be characterized as a "Neophyte Idealist." In working with this type of teacher -- who is often a young teacher, and often very receptive to the idea of consultation-- consultants may need to establish objectives in small, gradual steps rather than overwhelming him or her with too many new ideas and strategies all at once. Build on this teachers' strengths and involve him or her in determining personal professional development objectives.
4. The Type IV teacher has neither the technical skills nor the values/attitudes that seem to promote effective consultation. This type of teacher may never have had these characteristics, could be "burned out," or for

some other reason does not have the kind of commitment necessary for achieving positive outcomes for students with learning and/or behavior problems. It seems that the Type IV teacher's needs cannot be successfully addressed using our consultation model. Clearly, it would be virtually impossible to address student needs if the teacher has neither the general skills nor interest in doing so.

Figure 1

A Typology of Consultees

Abilities/Skills That Facilitate Consultation			
		+	-
Attitudes/Values That Facilitate Consultation	+	Type I: Master Teacher	Type III: Neophyte Idealist
	-	Type II: Technician	Type IV

IX. Conclusion.

- A. Consultation is a service that can assist schools in providing an appropriate education to students with severe disabilities and challenging behaviors in least restrictive environments. Consultation is consistent with the values of normalization and integration, and can be:
 1. Effective in remediating learning and behavior problems;
 2. An efficient use of resources, because it does not duplicate existing services (as self-contained and segregated programs do) and is less costly than more restrictive services;
 3. Preventive, as consultees learn skills that will generalize and transfer;
- B. However, as long as special services are tied to restrictive placements, consultation is likely to continue to be a seldom-used step on the continuum of services. Certain administrative and programmatic arrangements are the necessary setting events for effective consultation:
 1. Resources may need to be reallocated and roles revised before educators can consult with one another. Outside consultants are not always available; other consultation models use, for example, school psychologists (Giangreco & Meyer, 1988) or "methods and resource" teachers (Porter, 1988) who are employees of the school system.
 2. Organizational and professional norms must support collaboration and ongoing professional development. References

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